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# SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

	ACCIDENT STATEMENT
Date Of Report	24/05/2019 16:44
Date Of Accident	10/04/2019 12:45
Exact Location Of Accident	JUNC OF TANJONG KATONG RD SOUTH & MOUNTBATTEN RD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKX2153Y
Insured/Policyholder	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	Anna and Anna de Anna and Anna
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994387
Cover Note Number	
Driver	
Name of Driver	LOH CHENG KIAT
NRIC No	S7122508I
Date Of Birth	23/06/1971
Occupation	OUTDOOR
Date Of Driving Pass	17/02/2009
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
	(LOCAL) +65-97883356
Fax Number	- 00 minute (10 minute 10
Contact Number	
Mail Address	NOEMAIL

Address 62 ELIAS RD #12-06

Postcode 519939

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

\*

Insurance Company of Driver's Own Vehicle

-

2

2

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : UNKNOWN

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name PASIR RIS NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 1800-5852999 - FAX NO: 65855261

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SLV1541R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode Insurance Company Name Nature Of Damage No. Of Passenger (Including Driver)

### SKETCH PLAN

## **IMPORTANT NOTICE**

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
  - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

EAS

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:

# SKETCH PLAN VEHICLE A -5KX 2153 3 venicure B -SLV 1541 R TOWARD KATONIA SHOPONTA CENTUR

# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report.	report number
	1/20190512/2085
AND I WOULD LIKE	10 ADD ON .
- UPON THR ACCIDENT	THERE WAS NO DAMPGE TO
THE BOTH VEHICLE.	
VEHICLE A	
- 5KX 2153 Y	
VEHICLE B	
- SLV 1541 R	
- C. J. P.	
CLARATION	

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder)

Reporting Centre Personnel's Signature Name:





1 of 3

Report No. T/20190512/2085

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/05/2019 19:19		//ade:	Vide Report No.:	Station Diary No.: 96
Informa	nt's Partic	ulars		
	f Informant: ENG KIAT		Address: 62 ELIAS ROAD #12-06 SING	GAPORE 519939
ID Type / ID No.: NRIC NO / S7122508I Nationality: SINGAPORE CITIZEN		081	Contact No.: Home/Office: Mobile: 97883356	
		EN	Email:	
Sex: Age: Date of Birth: Male 47 23/06/1971			Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3A	Date of Expiry:

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 10/04/2019 12:45	Type of Location X-Junction	
	oad 1 and Road 2 ATONG ROAD SOUT TEN ROAD	Road Surface:		Road Speed Limit:	
		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			T.	Anyone conveyed by	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SKX2153Y	W. N. S.				No Damage	1
SLV1541R	Car				No Damage	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

2 of 3 Report No. T/20190512/2085

Tel No: 1800-5852999

CONTINUATION OF REPORT

Name	LOW THE RESERVE TO SERVE TO SE	是是1000mm 1000mm 10000mm 1000mm 1000mm 1000mm 1000mm 1000mm 10000mm 10000mm 10000mm 10000mm 1000mm 10000mm 10000mm 10000mm 10000mm 10000mm 10000mm 10				
1000000000	LOH CHENG KIAT		(Allender)		PART OF THE PARTY	
Poloted V			ID	No.	S7122508I	
Related Vehicle	icle SKX2153Y (Car)				011223001	
11	(54)		Co	ntact No	070000=	
Hospital/Clinic	NIL	NIL			0. 97883356	
			Cla	ss of	101	
			Driv	/ing	Class: 3A	
5			Lice	ence &	Date of Expiry: NIL	
Date Treatment	NIL		Exp	in Date		
No. of Days gran	nted Madiant I	Date Dis	Scharge	NIII		
	nted Medical Leave NIL	Degree	of Injun			
Name	TAN TEOM		or mjur	/ NIL		
	TAN TECK YONG	100 TOTAL SECTION ASSESSMENT OF THE PERSON ASS	ID.	4500		
Related Vehicle		III III III III III III III III III II	IDN	0.	S7411994H	
Related Vehicle	SLV1541R (Car)				S7411994H	
Related Vehicle	SLV1541R (Car)			o. act No.	S7411994H	
Related Vehicle			Cont	act No.		
3709/0	SLV1541R (Car)		Cont	act No.	NIL	
3709/0	SLV1541R (Car)		Cont	act No.	NIL Class: NIL	
lospital/Clinic	SLV1541R (Car)		Cont Class Drivin Licen	act No.	NIL	
dospital/Clinic	SLV1541R (Car)		Class Drivin Licen Expin	act No.	NIL Class: NIL	
Hospital/Clinic	SLV1541R (Car)	Date Disci Degree of	Class Drivin Licen Expin	act No.	NIL Class: NIL	

On 10/04/2019 at about 1245hrs, I was driving my vehicle bearing the plate number SKX2153Y along Tanjong Katong Road South towards Paya Lebar. I then stopped at the traffic junction of Tanjong Katong Road South and Mountbatten Road as the traffic light was red. I was in the turn right lane and there is a vehicle bearing the plate number SLV1541R in front of me. As my eyes was dry, I rubbed both of my eyes. However, as I was rubbing my eyes, my foot released the brake and my vehicle moved forward

I then came out of my vehicle and made a check, both drivers then exchange particulars and left the scene. No one was injured at that point of time and I informed my vehicle rental company about the accident. Both of us agreed to settle the accident through the rental company.

On 12/05/19 at about 1700hrs, I discovered a letter from the Traffic police asking me to lodge an accident





3 of 3

Report No. T/20190512/2085

Police Station Of Origin: Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE 519457

Tel No: 1800-5852999

CONTINUATION OF REPORT

### Sketch Plan

NP168

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Sgt 2 JEREMY CHUNG	Signature Of Informant:	
Signature Of Interpreter: Not applicable	Date/Time: 12/05/2019 19:19	
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:	
Authentication Stamp		

SINGAPORE POLICE FORCE

# REPUBLIC OF SINGAPORE DENTIL CARENCE \$71225081





LOH CHENG KIAT

罗济吉

CHINESE

23-05-1571

SINGAPORE







VOCATIONAL LICENCE Licence No : \$71225081 Name : LOH CHENG KIAT

Please visit www.lta.gov.sg to check the status of this vocational licence

28-12-1995

62 ELIAS ROAD #12-06 SINGAPORE 519939

NRIC No: \$71225081

Date: 01/02/2012

No: 6943986

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

- PASS DATE

Class 3A Motor cars without clutch pedals (Auto) =< 3080kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

Licence No: \$7122508

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please

NP 428A

Type

Description

return to LTA, 10 Sin Ming Drive, Singapore 575701.

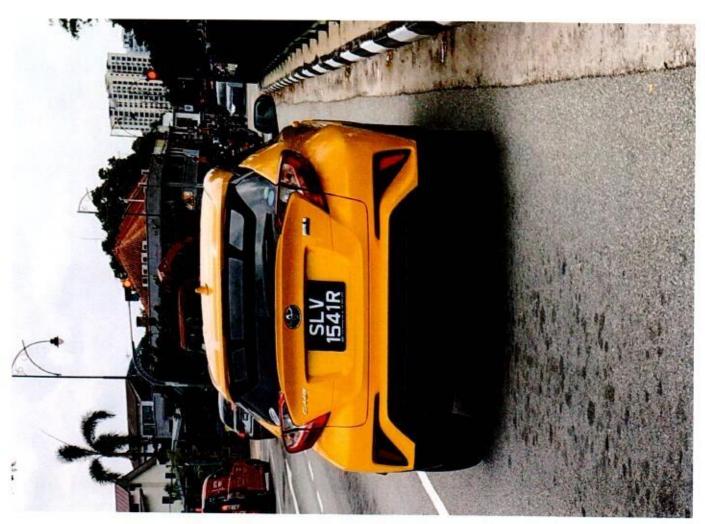
12

TAXI VL

Issue Date

07/02/2019







Vehicle No.	SKX 2153 1 Model / Make water owns
Date of Accident	10/04/2019
Time of Accident	1245 HRS
Location of Accident	SUNCTION OF TON JONE KARONE ROAD SOUTH / MOUNTBOTTE
Exact purpose use during acci	dent worken from
Name of Owner	Turnera wagowa per co
Telephone No.	H/P: 9380 2233 Home: Office:
NRIC	2015 330466
Address	2 KARL BURNT AVE 2 #01-17 KARL BURNT QUEOTUS
Claim type	OD THIRD PARTY REPORTING ONLY S(417921)
Insurance Company	916
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft
Policy No.	999994387
Name of Driver	As Above If No.
NRIC	5 71225081 Any Passengers: 1 (Fizmaria)
Date of birth	23 Jun 1971
Occupation	Outdoor / Indoor
Driving License Pass Date	17 FEB 2007
Gender	Male / Female
Contact No.	H/P: 97573356 Home: Office:
Address	62 6493 ROAD #12-06 5(519939)
Driver have any own vehicle	No, If yes, Reg No.
Relationship	Employee, If no, state RENTAL / CRASING
Weather condition	Clear Raining Other
Road Surface	Ory Wet Other
Any Injuries	No. If Yes, Who?
Name And Contact No.	ir res, wild:
Name And Contact No.	
Police Report	No, If Yes, Where? Passin Ris NPC
Vehicle B No.	SLV 1541 R Any Passengers:
Name of Driver	Contact No. :
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	
Vehicle G No.	Any Passengers :  Any Passengers :
Witness Name	Witness Contact :
Accident Portion	FROM (NO DAMAGE)
Camera Recorder	Yes /No
Email Address	1657(10)
PARTICULAR WORKSHOP	N-51 DIROPORTINE PHZ LKD
CONTACT NO.	6842 0051 / 6744 0510
CONTACT PERSON	IAN
FAX NO	6741 0510

M Z 400



### CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

(The below excess is subject to GST)

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. **SKX2153Y** POLICY NO. 999994387

POLICY EXCESS

S\$2000.00 (Sect | & II)

WINDSCREEN EXCESS

S\$100.00

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

SUM INSURED YES INSURING WITH COE/PARF YES

SKX2153Y

Twincar Leasing Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

4) DATE OF EXPIRY OF INSURANCE

19 October 2018 18 October 2019

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

Any person who is driving on the Insured's order or with their permission.

\$\$2,000.00 Section I & \$\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience in Singapore. Up to \$250.00 one-time waiver excess under section I for build in car camera and applicable on non at fault claim only. (Valid for 6 months).

Accident repair can be carried out at any of your preferred workshop for repair subjected that all claim matters does not involved any lawyer services. An additional excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

### 6) LIMITATION AS TO USE\*

- 1) Use for social, domestic, pleasure purposes and business purposes of insured
- 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired.
- Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.

It is hereby agreed and acceptance that we would make special arrangement to this workshop known as N-51 Automotive Pte Ltd to be your accident claim reporting center based on the conditions below.

LOSS OF USE

Not included

HIRE PURCHASE COMPANY

NIL

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third- Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued in Singapore 17 Oct 2018

Swift Link Insurance Agency - 502117

61 Ubi Avenue 2

#08-04A Automobile Megamart

Singapore 408898

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

SSPORC

**ORIGINAL** 



**Enquire Vehicle Registration Details** 

# **Owner Particulars**

NRIC/Passport

/Company Cert

201533046C

No.:

Owner ID Type:

Company

Owner Name:

TWINCAR LEASING PTE. LTD.

Registered

Address:

2 KAKI BUKIT AVENUE 2 #01-17 KAKI BUKIT AUTOHUB SINGAPORE 417921

Mailing Address:

s:

Birth Date:

# Vehicle Particulars

Vehicle No.:

SKX2153Y

Previous Vehicle

No.:

Effective Date of

Ownership:

30 Nov 2015

Original Regn Date:

30 Nov 2015

Registration Date:

30 Nov 2015

Year of

Manufacture:

2015

Vehicle Type:

Private Hire (Chauffeur) Motor Car

Vehicle Scheme:

Vehicle

Attachment 1:

No Attachment

Vehicle

Attachment 2:

Vehicle

Attachment 3:

Vehicle Make:

TOYOTA

Vehicle Model:

COROLLA ALTIS CLASSIC 1.6 CVT

Primary Colour:

Grey

Secondary Colour:

Passenger

Capacity:

4

Chassis No.:

MR053REH104538075

Engine No.:

1ZRY205202

Engine Capacity /Power Rating:

1598 cc/-

Maximum Power

Output:

90.0 kW (120 bhp)

Propellant:

Petrol